Application or Docket Number

Effective January 1, 2003  D7244-06/34-05/3												
CLAIMS AS FILED - PART I (Column 1) (Column 2)									SMALL ENTITY TYPE			THAN ENTITY
TOTAL CLAIMS			12				RAT		FEE	1	RATE	FEE
FOR			NUMBER FILED		NUMB	ER EXTRA	BASIC	EE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			12 minus 20=		* Ø		X\$ 9	_	****	OR	X\$18=	
INDEPENDENT CLAIMS			\ minus 3 =		* /		X42:		<del></del>		X84=	
MU	ILTIPLE DEPEN	IDENT CLAIM PI	RESENT		<del></del>		<u> </u>	-		OR		
* If	the difference	in column 1 is	less than zero, enter "0" in co			olumn 2	+140 TOTA	-4		OR	+280=	- <del>3</del>
								'L		OR	TOTAL	250
	CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)							SMALL ENTITY			OTHER SMALL I	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIC PAID	BER DUSLY	PRESENT EXTRA	RATE	=	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	#	Minus <sup>*</sup>	**		=	X\$ 9=	-		OR	X\$18≃	
	Independent	<del></del>			=	X42=			OR	X84=		
	FIRST PRESE	NTATION OF M	JLTIPLE DEI	PENDENT	CLAIM		+140	_			+280=	
							TO1			OR	TOTAL	
		(Column 1)		(Colur	nn (1)	(Column 3)	ADDIT. F	EE L		OR	ADDIT. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER		HIGH NUMI PREVIO	EST BER	PRESENT EXTRA	RATE		ADDI- TIONAL		RATE	ADDI- TIONAL
	~	AMENDMENT		PAID	-		<b> </b>	_	FEE			FEE
	Total	*	Minus	**		=	X\$ 9:		<del></del>	OR	X\$18=	
	Independent FIRST PRESE	* NTATION OF MU	Minus	***	CLAIM	=	X42=			OR	X84≃	
		. vii ilov or me		ZIVDE)VI	OBAIN		+140:	-		OR	+280=	
							TOT ADDIT, F			OR	TOTAL. ADDIT. FEE	
		(Column 1)		(Colun	nn 2)	(Column 3)				•		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIC PAID I	BER OUSLY	PRESENT EXTRA	RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9=			OR	X\$18=	
	Independent	*	Minus	***		=	X42=	+			X84=	
٧	FIRST PRESE	NTATION OF MI	JLTIPLE DEF	PENDENT	CLAIM			$\dashv$		OR	∧04=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.												
**	f the "Highest Nu If the "Highest Nu	mber Previously Pa mber Previously Pa	uid For" IN THI aid For" IN THI	S SPACE is S SPACE is	less that less tha	n 20, enter "20." n 3, enter "3."	ADDIT, FI	EL			TOTAL ADDIT. FEE	
•	The "Highest Num	nber Previously Pai	d For" (Total o	r Independe	ent) is the	highest numbe	r found in the	аррі	ropriate box	in col	umn 1.	

FORM PTO-875 (Rev. 12/02)

\*U.S. Government Printing Office: 2003 - 498-278/69151

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